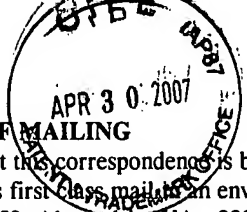
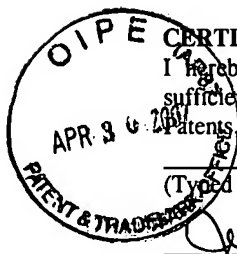


AF
Ifw



CERTIFICATE OF MAILING

I hereby certify that the correspondence is being deposited with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents PO Box 1450, Alexandria, VA , 22313-1450 on 25 April 2007
Jeannie Camara

(Typed or Printed Name of Person Mailing Paper or Fee)

Jeannie Camara
(Signature of Person Mailing Paper or Fee)

PATENT APPLICATION
Attorney Docket No. SUN-P9325

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE PATENT APPLICATION OF)
) Examiner: Fennema, Robert E.
Marc Tremblay et al.)
) Group Art Unit: 2183
Serial No. 10/637,169)
)
Filing Date: 8 August 2003)
)
Title: FAIL INSTRUCTION TO SUPPORT)
TRANSACTIONAL PROGRAM EXECUTION)

AMENDMENT TRANSMITTAL LETTER

Mail Stop: AF
Assistant Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- ☒ Response under 37 C.F.R. § 1.111 to official action mailed 8 March 2007.
- ☐ A petition for extension of time is also enclosed with a fee of \$55.00 for a one-month extension for a small entity.
- ☐ Terminal disclaimer under 37 C.F. R. § 1.321(c), including
 - ☐ check for \$130.00 fee under 37 C.F.R. § 1.20(d), and
 - ☐ 2 certificates under 37 C.F.R. § 3.73(b).
- ☐ Information disclosure statement, form 1449 and ___ references.
- ☒ No additional claims fees are required.

☐ An additional fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$0.00

- ☐ A check in the amount of \$____ is enclosed.
☐ Charge \$____ to Deposit Account No. ____ (Docket No. ____).
☒ Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. SUN-P9325).

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Respectfully submitted,

By



Shun Yao
Registration No. 59,242

Date: 25 April 2007



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Jeannie Camara

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Jeannie Camara
(Signature of Person Mailing Paper or Fee)

Application Number : 10/637,169
Applicant : Marc Tremblay, et al.
Filed : 8 August 2003
TC/A.U. : 2183
Examiner : Fennema, Robert E.

Confirmation Number: 2951

Docket Number : SUN-P9325-MEG
Customer No. : 57,960

M/S: Box Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the office action of **8 March 2007**, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.